

# EXHIBIT 7

Form X-17A-5 Filer Information	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549	OMB APPROVAL
FORM X-17A-5	ANNUAL AUDITED REPORT Form X-17A-5 Part III	OMB Number: 3235-0123, 3235-0749
	FACING PAGE Information Required of Brokers and Dealers Pursuant to Section 17 of the Securities Exchange Act of 1934 and Rule 17a-5 Thereunder	Estimated average burden hours per response: 12.00

## X-17A-5: Filer Information

Filer CIK	0000853784
Filer CCC	XXXXXXXX
Is this a LIVE or TEST Filing?	<input checked="" type="radio"/> LIVE <input type="radio"/> TEST
Would you like a Return Copy?	<input type="checkbox"/>
Is this an electronic copy of an official filing submitted in paper format?	<input type="checkbox"/>
Confirming Broker Dealer Copy File Number	
Confirming Security-Based Swap Entity Copy File Number	
<b>Submission Contact Information</b>	
Name	
Phone	
E-Mail Address	
Notify via Filing Website only?	<input type="checkbox"/>

## X-17A-5: Submission Information

Report for the Period Beginning	01-01-2022
and Ending	12-31-2022
Type of Registrant	<input checked="" type="checkbox"/> Broker-dealer <input type="checkbox"/> Security-based swap dealer <input type="checkbox"/> Major security-based swap participant
	<input type="checkbox"/> OTC derivatives dealer

### Material Weakness

Does this submission include an accountant's report covering the compliance report that identifies one or more material weaknesses?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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## X-17A-5: A. Registrant Identification

Name of Firm	HSBC SECURITIES (USA) INC.
<b>Address of Principal Place of Business (Do not use P.O. Box No.)</b>	
Address 1	452 FIFTH AVENUE
City	NEW YORK CITY
State/Country	NEW YORK
Mailing Zip/ Portal Code	10018
<b>Name and Telephone Number of Person to Contact in Regard to this Report</b>	
Name	Steven N Lombardo
Telephone Number	1-212-525-3425

## X-17A-5: B. Accountant Identification

### Independent Public Accountant

Name - if individual, state last, first, and middle name

PricewaterhouseCoopers LLP

Address 1

300 Madison

City

New York

State/Country

NEW YORK

Mailing Zip/ Postal Code

10017

Check One

- ☒ Certified Public Accountant  
☐ Certified Public Accountant not resident in United States or any of its possessions

## X-17A-5: Signature

### Oath or Affirmation

I, **Steve Lombardo**, swear (or affirm) that, to the best of my knowledge and belief, the financial report pertaining to the firm of **HSBC SECURITIES (USA) INC.**, as of **12-31-2022**, is true and correct. I further swear (or affirm) that neither the company nor any partner, proprietor, principal officer or director has any proprietary interest in any account classified solely as that of a customer, except as follows:

Signature

Steve Lombardo

Title

Chief Financial Officer

### Notary Public

Checking this box acknowledges that this oath or affirmation has been notarized.

